



JPW

IN THE UNITED STATE PATENT AND TRADEMARK OFFICE

In re the Application of: **Stamler, Loscalzo and Folts**

Application No: **10/646,713**

Group Art Unit: **1615**

Filed: **August 25, 2003**

Examiner: **I. Ghali**

For: **Use of Nitric Oxide Adducts**

Attorney Docket No: **102258.121 US3**

Commissioner of Patents
PO Box 1450
Alexandria, VA 22313-1450

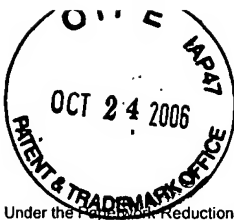
RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111

This Response is submitted in reply to the Office Action dated July 24, 2006, for which a response is due on or before October 24, 2006.

No fees are due at this time; however, the Commissioner is authorized to charge any necessary fees or credit any overpayments to Deposit Account No. 08-0219 to maintain the pendency of the present application.

Amendments to the Claims begin on page 2.

Remarks begin on page 5.



Under the Patent Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/646,713-Conf. #9858	
TOTAL AMOUNT OF PAYMENT		Filing Date	August 25, 2003	
(\$)		0.00	First Named Inventor	Jonathan S. STAMLER
		Examiner Name	I. A. D. Ghali	
		Art Unit	1615	
		Attorney Docket No.	0102258.00121US3	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>08-0219</u>
Deposit Account Name: <u>Wilmer Cutler Pickering Hale and Dorr LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims						Multiple Dependent Claims	
<u>35</u> - 55 = _____ x _____ = _____						Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims						Fee Paid (\$)	
<u>5</u> - 8 = _____ x _____ = _____							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
_____ - 100 = _____		/50	_____ (round up to a whole number) x _____		= _____		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): _____							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	53,212
Name (Print/Type)	Belinda Lew	Telephone	(202) 663-6000
		Date	October 24, 2006